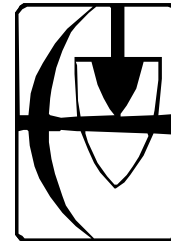


The Benefit Package



A Quarterly Newsletter for Northern California Laborers

Winter 2004 #27

Evaluate Our New and Improved Web site



www.norcalaborers.org

Earlier this year, several enhancements were made to the Laborers Web site. Whether you click onto the English or the Spanish version, you have the ability to request and receive important benefits information from the comfort and convenience of your home.


Today, finding benefit information has never been easier. With the click of a button, you can access each section of the Web site. **About Us** - lists ways to contact the Fund Office, the Training Center, a Local Union Office, or the Board of Trustees. You can also learn about the history of the Laborers Trust Funds and read the most current Summary Annual Report.

Customer Service - lists a Calendar of Events, including any holidays the Fund Office will be closed; a "How To" guide for Laborers and Employers; a schedule of visits to Local Unions by the Funds' Benefits Rep; and a search for medical plans available within your zip code. **Benefit Plans** - posts Summary Plan Descriptions for the Health and Welfare Plans and Pension and Annuity Plans. This section also includes a Comparison of Benefits table so you can review and compare plans at a glance.

Request Booklets and Forms - allows you to download (to view or print) benefit plan booklets. You can even request a copy to be mailed to you. Here,

you will also find health and welfare forms, Protected Health Information forms and notices, Pension, Annuity, Employer and miscellaneous forms. **What's New** - here you will find the latest Benefit Package and Training News, as well as any recently mailed benefit plan notices. **Questions and Answers** - lists answers to frequently asked questions by Laborers and Employers.

Training and Apprenticeship - lists contact information for the Training Center, a current course schedule, the sign-up procedure, training program overview, Apprenticeship Training program, the Training Course catalog, benefits while in training, safety information, and the Training Fund Board of Trustees. **Links to Other Sites** - connects you to Delta and VSP's Web sites and to Blue Cross where you can locate a *Prudent Buyer Plan* hospital or physician in your area. Here, you will find information on Health and Wellness, Safety and Training and links to Labor Organizations.

We feel our Web site is a valuable resource and we hope you find the site useful and informative. We encourage you to explore and evaluate our Web site at www.norcalaborers.org. After you have visited our site, take a few minutes to complete the online survey. We want to know what you think of our Web site so that we can better serve you. 



Good News!

In 1993, the Board of Trustees approved the addition of a Temporary Supplemental Benefit to your monthly pension benefit. The purpose of the Temporary Supplemental Benefit was and still is to help Pensioners and Beneficiaries pay for health and welfare coverage.

The Temporary Supplemental Benefit is not a guaranteed benefit and must be reviewed and approved annually by the Trustees, which they did in September 2004 for an additional year, or through November 30, 2005.

For a detailed explanation of the Temporary Supplemental Benefit, refer to the notice that was mailed to all Plan Participants on November 3, 2004.

IMPORTANT

The following notices are inserted in this issue of the **Benefit Package:**

Health and Welfare

- Women's Health and Cancer Rights Act of 1998
- Vision Service Plan's (VSP) Grievance System Notice

CAREFULLY READ THE NOTICES AND PLACE THEM IN YOUR PLAN BOOKLET.



We all recognize the symptoms of the common cold—a runny or stuffy nose, sneezing, sore throat, and a cough. A cold can make you feel miserable and drain you of the energy you need to go about your daily activities. Symptoms can last from 2 to 14 days.

Simple tips for reducing your risk of getting a cold are:

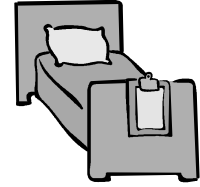
- Wash your hands frequently.
- Avoid sharing food and utensils with others.
- Clean frequently touched surfaces, such as doorknobs and telephones with a mild disinfectant.
- Use tissues, rather than handkerchiefs and discard them promptly and properly.

Though there is no proven cure for the common cold, symptoms can be managed by bed rest, drinking plenty of fluids, and gargling with warm, salt water.

There are medications available to treat symptoms of the common cold. Some help clear a stuffy, or runny nose, or sneezing. Some relieve minor aches, pains and headaches and some soothe a sore throat or quiet the cough.

If you have certain medical conditions, such as heart disease, high blood pressure, diabetes, or other chronic conditions, you should consult with your doctor before taking medications to treat cold symptoms. You should also make sure any treatments you take for your cold do not interact with other medications you are taking.

Know your benefits... All Hospital Admissions Require Utilization Review (UR)



If you are scheduled to be admitted to a hospital on an elective, non-emergency basis, you must have your physician arrange Utilization Review (UR) through Blue Cross, the Fund's Professional Review Organization (PRO). This review must be done before you are admitted to the hospital.


What is the purpose of UR? UR is performed to determine, or pre-certify the number of inpatient days that are medically necessary for a hospital stay. Blue Cross reviews your case, taking into consideration the type of surgery and any special circumstances that may affect your inpatient stay. This process is referred to as "Pre-Admission Review." It must be performed prior to a confinement for an elective, non-emergency stay. With the exception of emergencies, almost all inpatient stays are subject to Pre-Admission Review.

Next, while you are in the hospital, the PRO follows up with another review, called "Concurrent Review." The purpose of this review is to confirm the number of inpatient days originally authorized. In most cases, the PRO will not change the number of days it pre-authorized. Should the PRO change the number of days originally authorized, you will be advised of any change in time to make other arrangements, or to appeal the decision. If you are admitted to a hospital in an emergency, you only need to obtain Concurrent Review.

Because the Fund's Direct Payment Plan uses Blue Cross' *Prudent Buyer Plan* network, you most likely will be admitted to a participating hospital. *Prudent Buyer Plan* hospitals know that

health plans have UR requirements and will make arrangements for it to be performed. However, be sure to follow up with your physician or hospital to make sure UR has been performed. If you are being admitted to a non-participating hospital, your physician must arrange UR by calling Blue Cross at (800) 274-7767. If it is an emergency admission, you or someone caring for your affairs should notify Blue Cross at (800) 274-7767 within 24 hours of your hospitalization. Blue Cross will then arrange Concurrent Review.

What happens if you do not comply with Utilization Review? If you do not obtain Pre-Admission Review on an elective, non-emergency confinement, or Concurrent Review on an emergency admit, you will be responsible for 20% of the first \$10,000 of Plan benefits ordinarily in effect. That is in addition to your payment of 10% co-insurance at a participating hospital, or 30% at a non-participating hospital. In other words, your out-of-pocket costs could be 30% or as much as 50% of the first \$10,000 for non-compliance of UR. If you failed to obtain Pre-Admission or Concurrent Review, the PRO performs a "Retrospective Review" after you have left the hospital. If the PRO determines that your inpatient stay was not medically necessary, no benefits will be payable. If, however, it determines that your stay was medically necessary, you are still responsible for 20% of the first \$10,000 of benefits.

Key to maximizing your hospital benefits is to inform your physician and hospital that ***your health plan requires Utilization Review on all hospital admissions.*** 

More forms...

What the Explanation of Benefits (EOB) Shows You



Each time the Trust Fund processes a benefit claim, it generates an “Explanation of Benefits (EOB).” This document provides a lot of detail concerning a patient’s treatment by his provider. Besides summarizing the “billed charges” and the Fund’s “payment,” it includes a detailed breakdown of the services furnished by your healthcare provider. In this way, you know what your doctor did during your office visit.

Each procedure shows a “Billed Amount,” and a “Negotiated Amount” or “Allowed Amount.” If you use the services of a *Prudent Buyer Plan* provider, the EOB indicates “Yes” under the Billing Summary and the amount the provider has contracted for the service appears under the column “Negotiated Amount.” If you did not use the services of a *Prudent Buyer Plan* provider, a “No” appears next to “Participating” under the Billing Summary. There is no discount when you use the services of a non-*Prudent Buyer Plan* provider.

Following across, columns A, B, and C

show deductions from the Plan benefit. These are co-pays, deductible and co-insurance. Co-pays apply to certain office visits. Once your deductible is satisfied, no additional amount is withheld for the remainder of the Plan Year. If you use the services of a *Prudent Buyer Plan* provider, your co-insurance is 10%; if a non-*Prudent Buyer Plan* provider, the co-insurance is 30%. (This applies to the Active and Special III Plans; different percentages may apply in other Plans.) The difference between the Negotiated Amount/Allowed Amount, less any adjustments under Columns A, B, or C is the Fund Payment. The Patient Responsibility is the difference between the Negotiated Amount and the Fund Payment. If you used the services of a non-*Prudent Buyer Plan* provider, the Patient Responsibility is the difference between the Billed Charges and the Fund Payment. There is no discount—you are responsible for the Billed Charges, less the benefit paid by the Plan.

Always review the EOB. It is your record of how the Trust Fund processed your claim for benefits.



Enroll in Medicare


If you are close to age 65 and planning to retire, you should apply for Medicare Parts A and B coverage 3 months before you become age 65. You can apply for both Social Security benefits and Medicare Parts A and B coverage at the same time.

To apply, call or visit your nearest Social Security Office or call Social Security at 1-800-772-1213. Under certain circumstances, you can also apply online at www.ssa.gov.

If you plan to retire and do not apply for Medicare Parts A and B three (3) months before you attain age 65 or no later than 3 months after your 65th birthday, you will be required to wait until Medicare’s next General Enrollment Period (January 1 to March 31). In addition, you may be required to pay a surcharge for Medicare Part B for the remainder of your life.

Further, on the first day of the month in which you or your dependent become eligible for Medicare, the Trust Fund will deduct from its payment benefits payable under Medicare, WHETHER OR NOT YOU HAVE ENROLLED FOR MEDICARE. In other words, the Trust Fund becomes secondary payor and Medicare primary payor. In addition, you will not be eligible to enroll in Kaiser Senior Advantage.

If you have access to the Internet, you can learn more about Medicare at www.medicare.gov or call the toll-free number at 1-800-MEDICARE.



Laborers Health and Welfare Trust Fund for Northern California
 220 Campus Lane Fairfield, CA 94534-1498 Telephone (707) 864-2800

Explanation of Benefits

This notice summarizes the benefits for the claim described below.
 See reverse side for important information.

BILLING SUMMARY

INSURED'S NAME: J LABORER DATE OF SERVICE: 03/01/04 03/01/04
 INSURED'S ID: 6789 PROVIDER: J PHYSICIAN, MD
 PATIENT'S NAME: JOHN PARTICIPATING: YES
 PATIENT'S ACCT: 90000000 TOTAL CHARGES: \$475.00

PAYMENT SUMMARY

ISSUED TO: PROVIDER
 CHECK DATE: 06/01/04
 CHECK AMOUNT: \$157.50
 CHECK NUMBER: 987654

BREAKDOWN OF BILLED CHARGES AND BENEFIT DETERMINATION

DATE OF SERVICE FROM TO	DESCRIPTION OF SERVICES AND BENEFIT APPLICABLE	BILLED AMOUNT	NEGOTIATED AMOUNT	ALLOWED AMOUNT	A. LESS CO-INSURANCE	B. LESS DEDUCTIBLE	C. LESS COINSURANCE	FUND PAYMENT	PATIENT RESPONSIBILITY	SEE NOTE BACK
03/01/04	30217VRS-OFCE-DOTRER	\$300.00	\$150.00	\$150.00	\$150.00	\$0.00	\$0.00	\$0.00	\$150.00	1
03/01/04	410000TRAD-RAL-NC-BK04	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	1
03/01/04	11200000F-J0NRY	\$175.00	\$112.50	\$112.50	\$0.00	\$0.00	\$112.50	\$0.00	\$112.50	1
TOTALS		\$475.00	\$262.50	\$262.50	\$150.00	\$0.00	\$112.50	\$157.50	\$317.50	
LESS FPD DISCOUNT		\$0.00								
LESS PRIMARY INSURANCE PAYMENT		\$0.00								
LESS PROVIDER PAYMENT		\$0.00								
LESS PROVIDER PENDING		\$0.00								
LESS PROVIDER TOLL		\$0.00								
LESS FUND PAYMENT		\$157.50								
PATIENT PAYMENT		\$317.50								

The patient or the Trust Fund is not responsible for this amount per Prudent Buyer Plan agreement.

Condensed version of EOB for illustrative purposes.

D-04
9 MED
CL-1234567890 L-0001

CALENDAR

On or About This Date	We Will Mail	You Should
September 23, 2004 <i>(Mailed)</i>	Statement of Account for Work Period of February 1, 2004 - July 31, 2004	Verify hours and report any discrepancies to your Local Union. Retain statement for your records.
October 29, 2004 <i>(Mailed)</i>	Vacation-Holiday Benefit Checks	Interested in having future vacation benefit checks deposited electronically? Contact the Vacation Department at the Fund Office.
November 10, 2004 <i>(Mailed)</i>	Annuity Plan Statement of Individual Account	Review and report any discrepancies to your Local Union. Retain statement for your records.
December 17, 2004	Pension Statement of Account	Verify hours, credited service, and benefit units. Report any discrepancies to your Local Union. Retain statement for your records.



Contacting The Fund Office



Laborers Trust Funds
220 Campus Lane
Fairfield, CA 94534-1498



(707) 864 - 2800
or Toll Free
(800) 244 - 4530



Internet Web site:
www.norcalaborers.org

The *Benefit Package* is published by the Laborers Funds Administrative Office of Northern California, Inc. and is intended to provide general information about the plans. It is not intended as a substitute for official Plan documents. Your rights as a Plan Participant or Beneficiary can only be determined by consulting the actual text of the Plan Booklet.

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Laborers Funds Administrative
Office of Northern California, Inc.
220 Campus Lane
Fairfield, CA 94534

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